

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

DOCKET NO. JBP-566

Applicants: Burwell et al.

Serial No.: 09/938,683

Art Unit: 1772

Filed : August 24, 2001

Examiner:

For : ARTICLE FOR CLEANSING, TREATING, AND/OR EXFOLIATING SKIN

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Missing Parts, Commissioner for Patents, Washington, DC 20231 on

November 28, 2001

(Date of Deposit)

Andrea L. Colby

(Name of applicant, assignee, (or Registered Representative)

(Signature)

November 28, 2001

(Date of Signature)

BOX MISSING PARTS

Commissioner for Patents

Washington, D.C. 20231

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Burwell et al. entitled ARTICLE FOR CLEANSING, TREATING, AND/OR EXFOLIATING SKIN attorney Docket No. JBP-566, to complete, pursuant to Rule 51, this application filed on August 24, 2001 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/JBP-566/EMH in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/JBP-566/EMH. This sheet is submitted in triplicate.

Respectfully submitted,

Andrea L. Colby

Andrea L. Colby

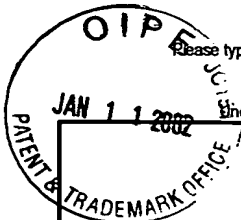
Reg. No. 30,194

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09/938,683-01102



Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION
AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing ☒ Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR

Attorney Docket Number	JBP-566
First Named Inventor	BURWELL, David
COMPLETE IF KNOWN	
Application Number	09/938,683
Filing Date	August 24, 2001
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ARTICLE FOR CLEANSING, TREATING, AND/OR EXFOLIATING SKIN
(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **08/24/2001** as United States Application Number or PCT International Application Number **09/938,683** and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

09/38/683 "01102

DECLARATION - Utility or Design Patent Application .

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status

I hereby appoint:

<input checked="" type="checkbox"/>	Practitioners at Customer Number	000027777	Number Bar Code
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Place Customer
Number Bar Code
Label Here

AND

☐ Practitioner(s) named below:

Name	Registration Number
------	---------------------

Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Erin M. Harriman at telephone number (732) 524-3619.

Direct all correspondence to: ☒ Customer Number ☐ OR ☐ Correspondence address below

Name: _____

Address:

Address:

City:	State:	ZIP
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State: **ZIP:**

ZIP _____

Country	Telephone:	Fax:
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Telephone: _____ Fax: _____

Fax: _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) David A.

Family Name
or Surname BURWELL

Inventor's
Signature

David A. Burwell

Date

11/14/01

Residence: City Princeton

State NJ

Country USA

Citizenship USA

Mailing Address 23 Bayberry Road

City Princeton

State NJ

ZIP 08540

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Lynn

Family Name
or Surname ARIDGIDES

Inventor's
Signature

Lynn Aridgides

Date

11/14/01

Residence: City Franklin Park

State NJ

Country USA

Citizenship USA

Mailing Address 189 Rachel Court

City Franklin Park

State NJ

ZIP 08823

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Family Name
or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country